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APPLICANTS

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** CONTINUING DATA ***** *SSP*
None

** FOREIGN APPLICATIONS ***** *SSP*
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| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature <i>DD</i> Initials <i>SSP</i> | | | | |

ADDRESS

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TITLE

Laser scanner using rotating holographic optical element

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| FILING FEE RECEIVED 1616 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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